

## Integrating Substance Use Screening into Adolescent Well Visits: A Summary for Pediatricians

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Substance use screening is a critical component of adolescent preventive care. The **American Academy of Pediatrics (AAP)** and **Substance Abuse and Mental Health Services Administration (SAMHSA)** recommend **universal screening** for substance use beginning at age 12.

### Evidence-Based Screening Tools:

- **CRAFFT 2.1+N**: A validated, adolescent-specific tool designed for ages 12–21. It includes a pre-screen (Part A) and, if positive, six risk behavior questions (Part B). The "+N" version includes questions about nicotine and vaping.
- **BSTAD (Brief Screener for Tobacco, Alcohol, and Drugs)**: Validated for ages 12–17, assesses frequency of use over the past year and helps identify levels of risk.
- **S2BI (Screening to Brief Intervention)**: Validated for ages 12–17, this tool asks about the **frequency of past-year use** of tobacco, alcohol, marijuana, and other substances to categorize risk level and guide next steps

### Implementation Tips:

- In the primary care setting it's helpful to choose 1 tool the practice will use a whole and ensure clinicians and staff are aware to consider how it can be integrated into the work flow via paper or verbal screening during the well visit.
- Administer **privately and confidentially**, ideally in written or electronic format, before the clinical encounter.
- Begin with **normalizing language**, e.g., "I ask all my patients these questions to better understand their health."
- Review responses nonjudgmentally. Use **motivational interviewing** to explore use, reinforce healthy choices, and assess readiness to change if needed.
- A **positive screen** (any past-year use or risk behavior) should be followed by a brief intervention and, if appropriate, referral to treatment.

By integrating tools like CRAFFT or S2BI into annual visits, pediatricians can identify early use, provide timely counseling, and support adolescent health.

**Use the 5 R's talking points for brief counseling.**



1. **REVIEW** screening results  
For each "yes" response: *"Can you tell me more about that?"*



2. **RECOMMEND** not to use  
*"As your doctor (nurse/health care provider), my recommendation is not to use any alcohol, nicotine, marijuana or other drug because they can: 1) Harm your developing brain; 2) Interfere with learning and memory, and 3) Put you in embarrassing or dangerous situations."*



3. **RIDING/DRIVING** risk counseling  
*"Motor vehicle crashes are the leading cause of death for young people. I give all my patients the Contract for Life. Please take it home and discuss it with your parents/guardians to create a plan for safe rides home."*



4. **RESPONSE** elicit self-motivational statements  
Non-users: *"If someone asked you why you don't drink, vape, or use tobacco or drugs, what would you say?"* Users: *"What would be some of the benefits of not using?"*



5. **REINFORCE** self-efficacy  
*"I believe you have what it takes to keep substance use from getting in the way of achieving your goals."*

**Give patient Contract for Life.** Available at [www.crafft.org/contract](http://www.crafft.org/contract)